

<http://www.courts.state.nh.us>

Case Name: _____

(if known)

MOTION FOR: _____

The _____
states the following facts and requests the following relief:_____

Date _____ Signature _____

Signature

Telephone _____ Address _____

Address

I certify that on this date I mailed/delivered a copy of this document to:

_____ Or _____
(other party) (other party's attorney)

(other party)

(other party's attorney)

Date _____ Signature _____

Signature

ORDER

☐ Motion granted.

☐ Motion denied.

Recommended:

Date _____

Printed Name of Marital Master

Signature of Marital Master

So Ordered:

Date _____

Printed Name of Judge

Signature of Judge